

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000026918

**Entity Name:** ORION ALLIANCE, LLC

**Current Principal Place of Business:**

949 BAY BRIDGE CIRCLE  
APOPKA, FL 32703

**Current Mailing Address:**

949 BAY BRIDGE CIRCLE  
APOPKA, FL 32703 US

**FEI Number:** 20-0979505

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WILCOX, KAREN L  
949 BAY BRIDGE CIRCLE  
APOPKA, FL 32703 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WILCOX, KAREN L  
Address 949 BAY BRIDGE CIRCLE  
City-State-Zip: APOPKA FL 32703

Title MGR  
Name SALADINO, JOSEPH A  
Address 2901 SAND OAK LOOP  
City-State-Zip: APOPKA FL 32712

Title MGRM  
Name KIERSTEAD, BONNIE  
Address 2901 SAND OAP LOOP  
City-State-Zip: APOPKA FL 32712

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAREN L WILCOX

MGRM

04/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date